

<<< IMPORTANT >>>

**THE REFUGEE HEALTH SECTION
DOES NOT HAVE COMPLETE COPIES
OF YOUR MEDICAL RECORDS. IF
YOU WANT TO LOOK AT, GET A
COPY OF, OR CHANGE YOUR
MEDICAL RECORDS, PLEASE
CONTACT YOUR DOCTOR, CLINIC,
OR HEALTH CARE PLAN.**

**HOW DO YOU CONTACT US TO USE
YOUR RIGHTS OR TO COMPLAIN?**

Please call or write us if you want to use any of the privacy rights explained in this Notice or if you believe that we have not protected your privacy and wish to complain. Write to:

Privacy Officer

CA Department of Health Services

P.O. Box 997413

MS 0010

Sacramento, CA 95899-7413

(916) 445-4646 or (877) 735-2929 TTY/TDD

You may also call or write the Secretary of the U.S. Department of Health and Human Services, Office for Civil Rights, 50 United Nations Plaza, Room 322, San Francisco, CA 94102, telephone (800) 368-1019. Or you may call the U.S. Office for Civil Rights at 866-OCR-PRIV (866)-627-7748 or 866-788-4989 TTY/TDD.

The Refugee Health Section cannot take away your health care benefits or do anything to hurt you in any way if you file a complaint or use any of the privacy rights in this Notice.

If you have any questions about this Notice, and want more information, please contact the Privacy Officer, California Department of Health Services, at the address and phone number listed above.

**CHANGES TO
NOTICE OF PRIVACY PRACTICES**

The Refugee Health Section must obey this Notice starting on April 14, 2003. We have the right to change our privacy rules. If we do make any changes, we will rewrite this Notice and give it to you right away.

To get a copy of this notice in other languages, Braille, large print, audiocassette or computer disk, please call or write the Privacy Officer at the number or address listed above.

**California
Department of Health Services**



**REFUGEE HEALTH
SECTION
REFUGEE HEALTH
ASSESSMENT PROGRAM**

**NOTICE of
PRIVACY
PRACTICES**

Effective April 14, 2003

This notice describes how medical information about you may be used and disclosed and how you can get access to this information.

PLEASE REVIEW IT CAREFULLY.

The Refugee Health Section must keep your health information private. We must give you this Notice about the law and how we can use and share your health information and what your rights are.

HOW WE MAY USE AND SHARE INFORMATION ABOUT YOU

Federal law requires us to use and share information we have about you only for operating the Refugee Health Assessment Program. This information includes such things as your name, address, personal facts, medical history, and medical care given to you.

We use this information and share it with others for the following reasons:

- ♦ **For Treatment:** The Refugee Health Section may use information in your health records to check how complete your health care services are and their quality.
- ♦ **For Payment:** The Refugee Health Section approves and pays the clinic that provided health care services to you. When we do this, we may talk with the doctors, clinics, and others who bill us for your care.
- ♦ **For Health Care Operations:** The Refugee Health Section may use your health care record to check your health care services. We may also use this information in audits or fraud investigations, or for planning and managing the program.

SOME OTHER WAYS WE MAY SHARE YOUR INFORMATION

The law also allows the Refugee Health Section to use or give out information we have about you for the following reasons:

- ♦ To call or write to you about your benefits under the Refugee Health Section
- ♦ To agencies that oversee the health care system, for audits or investigations
- ♦ In appeals of decisions about health care claims paid or denied by the Refugee Health Section
- ♦ To the federal government when it is checking on how we are meeting privacy laws
- ♦ To gather information which can no longer be traced back to you

We may give out health information about you to organizations that help us run our program. If we do, we will make sure that they protect the privacy of your information we share with them.

Some state laws limit sharing the information listed above. For example, there are special laws that protect information about HIV/AIDS status, mental health treatment, developmental disabilities, and drug and alcohol abuse care. We will obey these laws.

WHEN WRITTEN PERMISSION IS NEEDED

If the Refugee Health Section wants to use your information for any reason not listed above, it will get written permission from you. If you give permission to use or share your information for other reasons, you may take it back in writing at any time.

WHAT ARE YOUR PRIVACY RIGHTS UNDER THE LAW?

You have a right to:

- ♦ Ask us not to use or share your personal health care information in the ways listed above. We may not be able to agree with your request.
- ♦ Ask us to contact you only in writing or at a different address, post office box, or telephone number. We will accept reasonable requests if needed to protect your safety.
- ♦ To see and get a copy of your Refugee Health Section information and records. The Refugee Health Section records have medical information from your first refugee health evaluation. You may need to pay a fee for the costs of copying and mailing records. We may keep you from seeing all or parts of your records when the law allows. If we do, we will give you information on how to appeal our decision.
- ♦ To change the records if you believe some information we have about you is wrong. We may deny your request if the information is not made or kept by the Refugee Health Section, or the information is already correct and complete. If your request is denied, you may write a letter disagreeing with our decision, and your letter will be kept with your records.
- ♦ You have the right to request a list of the times when we have shared your health information after April 14, 2003. The list will tell you what information we shared, with whom, when, for what reasons. The list will not have the times when we gave information to you, when we had your permission, or when we shared it for treatment, payment, or health care operations.
- ♦ You have a right to get a paper copy of this Notice of Privacy Practices when you request it. You can also find this Notice on our Refugee Health Section website at the California Department of Health Services' website: <http://www.dhs.ca.gov>.